

**BOARD OF REGISTERED NURSING**

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ACCEPTANCE AND IMPLEMENTATION OF ORDERS

The Board has received inquiries regarding the registered nurse's responsibility for accepting and/or implementing an order when the legal authority for the order is not clear and/or when the appropriateness of the order is questioned. In response to these inquiries, the Board has developed the following guidelines, which delineate the Board's expectations of a competent registered nurse (RN) in the acceptance and implementation of orders, which affect the direction of client care.

STATUTORY AUTHORITY

The Nursing Practice Act, Section 2725(b)(2) states that the practice of nursing includes:

Direct and Indirect patient care services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician, dentist, podiatrists or clinical psychologist as defined by Section 1316.5 of the Health and Safety Code.

The RN thus may accept orders initiated by physicians, dentists, podiatrists, or clinical psychologists.

ASSESSMENT

The RN is to assess all orders before implementation to determine if the order is:

- in the client's best interest;
- initiated by a person legally authorized to give direction for client care to an RN, i.e., physicians, dentists, podiatrists, clinical psychologists and nursing orders initiated by RNs;
- in accordance with all applicable statutes, regulations and agency policies.

ACTION

If the order is consistent with the aforementioned criteria, the RN may either implement the order or delegate the implementation to the appropriate person(s). In the event that any of the criteria are not met or if there is any confusion, doubt, or misunderstanding about the order, the RN is to seek clarification of the order. This may include the physician, initiator of the order, nursing supervisor or other authorized medical officer. Clarification is to be obtained prior to implementation of the order. The Board requires that the RN act as the client's advocate by challenging, and if appropriate, changing decisions or activities which in the nurse's judgment do not meet the assessment criteria previously listed. The RN's actions in challenging and/or changing an order should be in conformance with any agency policies and procedures.

NURSING ADMINISTRATORS

Nursing supervisors and administrators play a crucial role when orders are appropriately challenged by an RN. The Board expects nursing supervisors and administrators to support the RN in not implementing an order which is not clearly in the client's best interest and/or does not meet the assessment criteria

previously listed. Furthermore, the Board encourages nursing administrators to have written policies and procedures, which define the process and channels of communication for the challenging and changing of orders by RNs.

The Board recommends that each institution which permits RNs to accept and implement transmitted medical orders review the legal basis for transmitted orders and develop appropriate policies and procedures. In general acute care facilities, the Interdisciplinary Committee should participate in the review and development process since its responsibilities include providing for maintaining clear lines of responsibilities of the nursing service for nursing care of patients and of the medical staff for the medical care in the facility. The Board strongly urges interdisciplinary committees and nursing service administrators to preserve and/or promote clear, collaborative relationships between RNs and physicians to ensure that clients' needs are met in a safe, timely and knowledgeable manner.

PHYSICIAN'S TRANSMITTED ORDERS

RNs may accept and implement a medical order which is transmitted by an agent of the physician after determining: 1) that the order is **being transmitted and not initiated** by the physician's agent, e.g., nurse practitioners, physician assistants, clinical pharmacists; 2) that the order is appropriate for the client's condition and is in his or her best interest; and 3) that the order is in compliance with applicable statutes, regulations and agency policies.

ACCEPTING ORDERS FROM CLINICAL PHARMACISTS

The BRN has determined that an RN can accept and implement an order from a pharmacist functioning in accordance with pharmacy law and RNs may regard the orders of the clinical pharmacist as a transmitted order from the physician, and thus may accept orders from a clinical pharmacist.

Pharmacy law allows the clinical pharmacist to:

Perform the following procedures or functions as part of the care provided by a health care facility, a licensed home health agency, a licensed clinic in which there is a physician oversight, a provider who contracts with a licensed health care service plan with regard to the care of services provided to the enrollees of that health care service plan, or a physician, in accordance, as applicable, with policies, procedures, or protocols of that facility, the home health agency, the licensed clinic, the health care service plan, or that physician, in accordance with subparagraph (C):

- Ordering or performing routine drug therapy-related patient assessment procedures including temperature, pulse and respirations.
- Ordering drug therapy related laboratory tests.
- Administering drugs and biologicals by injection pursuant to a prescriber's order (the administration of immunizations under the supervision of a prescriber may also be performed outside of a licensed health facility).
- Adjusting the drug regimen of a patient pursuant to a specific written order or authorization made by the patient's prescriber for the individual patient, and in accordance with the policies, procedures, or protocols of the health care facility, home health agency, licensed clinic, health care service plan, or physician. Adjusting the drug regimen does not include substituting or checking a different drug, except as authorized by Section 4073.

ACCEPTING ORDERS FROM A REGISTERED DIETICIAN OR OTHER NUTRITIONAL PROFESSIONAL

RNs may implement a registered dietitian order for medical laboratory tests per established protocol as approved by the referring physician. In the clinic setting the RN is to be afforded the opportunity to perform a patient assessment in the absence of the referring physician when a registered dietitian or

other nutritional professional orders a medical laboratory test. (authority SB 16942 Soto Chapter 325 effective January 1, 2003)

Business and Professions Code, Section 2585 authorizes registered dietitians and other nutritional professionals authorized in BCP 2585 (e) to provide dietary treatments, provide nutritional and dietary counseling, conduct nutritional and dietary assessment, develop nutritional and dietary treatments, including therapeutic diets and **order medical laboratory tests related to nutritional therapeutic treatments when authorized to do so by a written protocol prepared and approved by the referring physician and surgeon, and accept or transmit verbal orders consistent with the established an established protocol for individuals or groups of patients in licensed institutional facilities or in private office settings.** (authority AB 1444, Maddox, Chapter 628, effective January 1, 2002)

Statutes and regulations pertaining to nursing, dentistry, podiatry, clinical psychology, medicine and all mid-level practitioners of medicine are primarily in the Business and Professions Code and Title 16 of the California Code of Regulations (CCR). Additional statutes and regulations include the Health and Safety Code and Title 22 (CCR).